

## Attitudes of Iranian Interns and Residents Towards Euthanasia

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**Abstract:** Euthanasia is the focus of attention nowadays and some studies indicated the public inclination towards legalization of this act for end stage patients. The medical profession is more reluctant than the public in this area. due to lack of knowledge about euthanasia in our country, we studied the interns and residents' attitudes regarding this. This was a descriptive study using cluster-sampling method. The study population was the interns and residents of Sari, Babol and one of Tehran medical universities. The attitudes of the subjects toward euthanasia or PAS were studied using a questionnaire. Three hundred and twenty-one interns and residents volunteered to take part in this study. According to the findings, 86% of the study population had some and 14% had no knowledge about euthanasia. 88% had some experiences with end stage patients and 12% did not have such an experience. 49% agreed with and 51% opposed to euthanasia. 49% of the subjects stated that they would assist patients wanting euthanasia provided if it becomes legal and 51% said that they would not do so. Although most of the Iranian interns and residents experienced end stage patients, more than half of them opposed to the legalization of euthanasia.

**Key words:** Euthanasia • Medical student • End-stage patients • Iran • Attitude

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### INTRODUCTION

Due to the advancement of medical science, life span has been increased; and with the changes happening in the life Style, the pattern of common diseases has changed, too. Most of incurable diseases are being treated nowadays. Still many of diseases such as heart diseases, cancer, AIDS and diabetes are common along with pain and long suffering with painful treatments. Considering changes in the life style and usage of new technology it is getting important for people how and where to die. The most important expression related to this problem is *euthanasia*. Active euthanasia is defined as a physician's deliberate act to cause a patient's death by directly administering a lethal dose of medication or other agent [1]. This performance is done with a fairly painless and quick method and for benevolent purposes [2].

Although this action is regarded as a crime in most communities, various cases have been observed

according to which with the suffering patients' consent or their relatives, *euthanasia* has been done and it has also been ignored and forgiven by portion of the public opinion [3]. According to religious point of view, although a doctor does not have the right to commit such an action, concerning the patient's consent and agreement, there are different views about the physician's fault rate [4]. Apart from moral and philosophical aspects of the issue, it is important to consider the viewpoints of the people involved in medical realm. There have been great deals of studies in this regard in other countries. A majority of Virginia (USA) students of a 4-year college believed that a physician should be able to assist in the suicide of a terminally ill person who requests help, though a larger percentage supported the withholding or withdrawing of life-sustaining technology and the right of a terminally ill person to end his or her own life [5]. The key predictors of that attitude were students' level of religiosity and belief in autonomy as a philosophical principle. In another research done on fifth and sixth

grade medical students in Italy, most of them believed that religious views prevent doctors from *euthanasia* and almost a large number of them were of the opinion that a better and more effective control and relief of the pain would decrease the *euthanasia* demands [6].

Two researches show that the depression among cancer diagnosed patients who were estimated to live less than three months had been more the cause of *euthanasia* demand [7,8]. Although, worldwide, the popular media and medical literature have been actively debating the topic of *euthanasia*, this is not the case in Iran. The only study on views about of *euthanasia* in Iran was done among 307 physicians; in which 58.6% of the respondents opposed *euthanasia*. Fifty-three physicians had witnessed *euthanasia* done by other doctors and 7 of them had done it themselves [9].

A very strong condemnation of suicide and assisted suicide by Islam is well known. The Holy Koran says, "Do not expose yourselves to ruin through your own hands [10]. The Hadith explicitly forbids a Muslim from praying for death [11]. Considering the little information existing in Islamic countries, especially in our society in this regard and with a view to different attitudes that people hold about *euthanasia*, viewpoints of a sample of Iranian interns and residents concerning *euthanasia* and factors influencing these attitudes have been evaluated in this study. It is important to know the views of this population, as these may affect their future behavior towards patients and peers.

#### METHODS AND MATERIALS

This cross-sectional study investigated attitudes of interns and residents of three Iranian universities which were selected via cluster sampling method; Mazandaran, Shahid Beheshti and Babol Universities of Medical Sciences and Health Services (UMSHS) in Sari, Tehran and Babol cities. Considering the probability of 50% positive and 50% negative (setting aside the neutral views) and the assurance of 95% correctness and 6% errors, the needed sample numbers was estimated as 364 participants. The sampling method was accidental multi stage in each cluster.

A self-administered questionnaire was used to assess interns' and residents' attitudes to suicide. Psychometric properties of the questionnaire overall, the data suggest that the questionnaire is a psychometrically sound instrument. Expert psychiatrists, psychologists and research methodologists of three mentioned universities confirmed content validity of this questionnaire.

Demographic specifications and *euthanasia* awareness in specimens were considered and registered.

The socioeconomic situation of the participants has been evaluated with the basic needs gratification method based on the family access to basic services such as welfare, sanitation, education, accommodation and economical independence [12].

The sample specimens were asked about the effective motives in order to ask for *euthanasia* and finally it was investigated in the case of its legalization whether they are willing to prescribe *euthanasia* or not.

The data were analyzed and presented as simple frequencies and percentages. In addition, we used Chi square and Student's t-test.

#### RESULTS AND DISCUSSIONS

Out of 364 specimens, 43 questionnaires (1.8%) were incomplete and as a result, the study was done on 321 participants that included 239 interns (74.4%) and 82 residents (25.6%). 168 of the study population (48%) were male and 153 of them were female (48%) and the range of their age was between 22 to 38 years old (mean = 30). The socioeconomic state of 54 participants (16.8%) was poor, 57% of them had moderate and 26.2% had good socioeconomic state.

In our study, Iranian medical students in two levels of internship and residency were put under investigation. Considering their working atmosphere and gender mixture, which is the same, there is no significant difference between attitudes in these two groups.

Iranian interns and residents' attitudes towards *euthanasia* are shown in Table 1 and 2. About 51.1% of them were opposing the task and 48.9% supported *euthanasia*. Interns of our study had slightly more positive attitudes than residents. Male responders had significantly more positive attitudes than females ( $p=0.00$ ), but there were no significant relationship between marital status, educational level (interns or residents) and socioeconomic state and attitudes towards *euthanasia*.

Interns and residents who had more religious attitudes and who were engaged in more religious practice had more opposing views to *euthanasia* ( $p=0.02$ ).

Most of the participants (88%) had seen end stage patients. These participants had more positive attitudes towards *euthanasia* ( $p=0.04$ ). Moreover, those who had

Table 1: Iranian interns' and residents' attitudes towards *euthanasia*

	n	%
Completely Support	24	7.50
Support	133	41.40
Without opinion	0	0.00
Oppose	106	33.00
Completely Oppose	58	18.10
Total	321	100.00

Table 2: Iranian interns' and residents' attitudes towards euthanasia with considering of degree

	Completely Oppose %	Oppose %	Without opinion %	Support %	Completely Support %
Resident	18	33.5	0	41	7.5
Intern	17.5	32.5	0	42	8
Total	18.1	33	0	41.4	7.5

faced the end stage patients among their friends and relatives had agreed more on euthanasia than others (P=0.02).

Most of the interns and residents (51.4%) believed that in case of t no intolerable pain, there would be no request for euthanasia on behalf of patients. They also believed that the existence of a caring attendant could prevent euthanasia demands (70.9% of participants). 72.5% of the study population believed that depression and hopelessness of the patients may lead to the euthanasia request and 73.7% believed that religion and belief in life after death are other preventive factors of euthanasia. About 77% stated that most of the patients who applied for this , felt they were burdens to others.

Finally, only 28.3% of the Iranian interns and residents claimed that they would personally perform euthanasia in reply to the patients' request if it was legalized. Less students in this study compared to those in the United States claimed that they would personally perform euthanasia in reply to the patients' request if it was legalized (28% vs. 55%) [13]. Some authors believe that a distinction should be made between agreement to legalize and willingness to personally carry out euthanasia [7].

To justify this, it can be referred to religious, cultural and social backgrounds in our country. In addition, the fact that euthanasia is introduced much less in our country's internal media than the European and American ones can influence people's points of views.

It is usually claimed that having religious beliefs is a powerful determinant of the kind of reactions one holds towards euthanasia. The ones who had stronger religious beliefs were more opposed to the task and 74% of the study population stated that believing in religion and the life after death prevents people from asking for euthanasia. These results are consistent with the previous studies [5-7]. Muslims strictly believe that only God should terminate their lives and Islam even encourages believers to view pain and suffering as a potential blessing or even as a canceling of sins [7]. The prevailing opinion among Islamic leaders is that, although the patient's informed consent to terminate his/her life might prevent the physician's prosecution, this act is considered as a sin [14]. However, there is no negative attitude

towards passive voluntary euthanasia for patients with an unbearable terminal disease in some Islamic sects [15].

In contrast to the previous studies according to which the young people were more in favor of euthanasia [2] there was no relationship between the age and attitudes towards euthanasia in our survey. The acceptance of euthanasia was found to be directly proportional to the clinical experience, especially with terminally ill patients [16]. Thus, medical students in Iran are more willing than doctors to accept euthanasia [9]. They don't see palliative care being given to end stage patient and that is a major factor influencing the attitude toward euthanasia. The same figure has been shown in Sudan [7].

The fact that professional as well as individual factors (e.g., moral and religious attitudes, religious practice, work experience) were associated with favorable attitudes toward euthanasia, underscores the necessity to examine the problem as a complex phenomenon involving the patient-doctor relationship.

It is suggested that in order to master this topic, the attitudes of other people in charge of the sanitation and treatment affairs and other relevant fields (e.g. nurses, psychologists, lawyers) and patients and the clergy would be scrutinized too.

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